

Division of Health Service Regulation

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: MHL0411021	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____ B. WING: _____	(X3) DATE SURVEY COMPLETED 07/12/2024
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NAME OF PROVIDER OR SUPPLIER ANDREA DRIVE	STREET ADDRESS, CITY, STATE, ZIP CODE 101 ANDREA DRIVE JAMESTOWN, NC 27282
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(X4) ID PREFIX TAG	SUMMARY STATEMENT OF DEFICIENCIES (EACH DEFICIENCY MUST BE PRECEDED BY FULL REGULATORY OR LSC IDENTIFYING INFORMATION)	ID PREFIX TAG	PROVIDER'S PLAN OF CORRECTION (EACH CORRECTIVE ACTION SHOULD BE CROSS-REFERENCED TO THE APPROPRIATE DEFICIENCY)	(X6) COMPLETE DATE
V 000	INITIAL COMMENTS An annual survey was completed on July 12, 2024. Deficiencies were cited. This facility is licensed for the following service category: 10A NCAC 27G .5600C Supervised Living for Adults with Developmental Disability. This facility is licensed for 6 and has a current census of 6. The survey sample consisted of audits of 3 current clients.	V 000		
V 108	27G .0202 (F-I) Personnel Requirements 10A NCAC 27G .0202 PERSONNEL REQUIREMENTS (f) Continuing education shall be documented. (g) Employee training programs shall be provided and, at a minimum, shall consist of the following: (1) general organizational orientation; (2) training on client rights and confidentiality as delineated in 10A NCAC 27C, 27D, 27E, 27F and 10A NCAC 26B; (3) training to meet the mh/dd/sa needs of the client as specified in the treatment/habilitation plan; and (4) training in infectious diseases and bloodborne pathogens. (h) Except as permitted under 10a NCAC 27G .5602(b) of this Subchapter, at least one staff member shall be available in the facility at all times when a client is present. That staff member shall be trained in basic first aid including seizure management, currently trained to provide cardiopulmonary resuscitation and trained in the Heimlich maneuver or other first aid techniques such as those provided by Red Cross, the American Heart Association or their equivalence for relieving airway obstruction.	V 108	RTL will complete persons specific on all clients and have all staff trained and in-serviced. Residential Director will retrain RTL to ensure all staff have received training in Person Specific on current persons support and newly admitted individuals To be monitored by quarterly peer review. RECEIVED JUL 30 2024 DHSR-MH Licensure Sect	9/10/24 9/10/24

Division of Health Service Regulation
LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE: *Priscilla F. Dowd* TITLE: *Regional Director* (X6) DATE: *7/14/2024*

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V 108	<p>Continued From page 1</p> <p>(i) The governing body shall develop and implement policies and procedures for identifying, reporting, investigating and controlling infectious and communicable diseases of personnel and clients.</p> <p>This Rule is not met as evidenced by: Based on record review and interview, the facility failed to ensure client-specific training for 3 of 3 audited staff (Staff #1, Staff #2 and the Residential Manager). The findings are:</p> <p>Review on 7/12/24 of Staff #1's personnel record revealed: -Hire date of 3/21/22. -No documentation of client-specific training regarding Clients #1, #2 and #3.</p> <p>Review on 7/12/24 of Staff #2's personnel record revealed: -Hire date of 4/1/24. -No documentation of client-specific training regarding Clients #1, #2 and #3.</p> <p>Review on 7/12/24 of the Residential Manager's personnel record revealed: -Hire date of 2/26/24. -No documentation of client-specific training regarding Clients #1, #2 and #3.</p> <p>Interview on 7/12/24 with Staff #2 revealed: -He was hired in April 2024 as a direct care staff. -He worked from Wednesday of one week to Wednesday of the next week. -He believed the Residential Manager (RM) and</p>	V 108			

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V 736	<p>Continued From page 3</p> <p>approximately 2 feet in length had a black substance in the crevices.</p> <p>-A dark and a light stain that was semi-circular in shape and approximately 3' x 3' was located on the carpet outside in the hallway of the 2nd client bathroom.</p> <p>Interview on 7/12/24 with the Qualified Professional revealed:</p> <p>-She believed the black substance around the ceiling air vent in the 1st client bathroom came from condensation.</p> <p>-She had not noticed the dust build on the ceiling vent grill in the hallway.</p> <p>-She believed the walk-in shower floor in the 2nd client bathroom needed to be cleaned and new grout put down.</p> <p>-She would have maintenance to look at the shower drain in the 2nd bathroom to determine if it needed to be replaced.</p> <p>-The black substance around the outside of the walk-in shower likely came from the shower water.</p> <p>-The carpet outside the 2nd client bathroom appeared to be from water leakage.</p> <p>-She would follow up with maintenance and have these identified areas addressed.</p>	V 736		